



Our mission is to deliver innovative support to lead aging agencies as we work together to promote, protect, and enhance the well-being of older people in Wisconsin.

Advisory Council Meeting Minutes

Friday, February 16, 2024 | 10:00 a.m. – 11:30 a.m.

Microsoft Teams Conference Call

Attendees

Members Present: Beth Esser, Dave Denomie, Dave Lowe, Mark Weisensel, Doris Bakker, Diane Cox, Robert Best

Members Not Present: Kathy Gauger

Others Present: John Schnabl, Executive Director; Nick Musson, OAA Consultant-Transportation Specialist; Janet Zander, Advocacy & Public Policy Coordinator; Rosanna Mazzara, Operations Coordinator

Call to Order: 10:05 a.m.

Review and Approval of November 3, 2023 Draft Meeting Minutes

Motion by Doris Bakker, seconded by Dave Lowe, to approve November 3, 2023 draft meeting minutes. Motion unanimously carried.

Public Comment:

None



Comments from Chair

Dave Denomie, Chairperson

- It's our busy time of the year for the Advisory Council in regards to the three year cycle of the planning process that is required of all ADRC's. The Advisory Council plays a large role in the development of plan goals of this living document.
- I also want to welcome the new members, Diane Cox and Robert Best.

Director's Report

John Schnabl, Executive Director

- The board of directors approved a new board member. Her name is Rowena Nelson. She has a background in finance and bookkeeping and works for Jackson County.
- Our 2022 agency audit is complete and approved by the board of directors and we are starting the 2023 audit.
- The state is doing a review of our GWAAR 3-year Aging Plan, at the Madison Office on March 22nd. They are going over our goals and progress with us and see if we need to change or modify any of those goals. The Advisory Council plays a big role in this 3-year plan.
- Our National Association of Area Agencies on Aging, called US aging, is doing their annual policy briefing on the 12th and 13th of March in Washington, DC. Mark Weisensel from our Advisory Council will be attending this along with myself, Janet Zander, and Cookie Lough from the board.
- There will be a statewide conference called the Aging, Disability, and Independent Living Conference on April 23rd through the 25th at the La Crosse Convention Center.
- The Veterans Self Directed Services program, headed up by Lisa Drouin, has over 100 participants. We will be expanding that program to veterans in Wisconsin but go to the Minneapolis VA.



Welcome – Robert Best

Nick Musson, OAA Consultant- Transportation Specialist

- Robert Best was welcomed to the Advisory Council, and everyone gave a short bio of themselves.

GWAAR AC New Member Resume – Denise Sweet

Nick Musson, OAA Consultant- Transportation Specialist

- Nick gave a PowerPoint presentation of new Advisory Council Applicant, Denise Sweet.
- She is retired of December 12, 2023, and her work experiences is pretty impressive. She was also an associate professor at UW Green Bay from 1989 to 2010. She was the Director of Conferences and Institutes for UW Extension at UW Eau Claire from 1987 to 1991. She was also a Research Assistant at UW Eau Claire from 1985 to 1987. During all that period of time, she was also a writer. She enjoys writing poetry. Denise has a strong belief in the importance of volunteerism to the Community. She's also a member of the Aging and Disability Services Advisory Committee at Bayfield County. I think she definitely would be a valuable member to this Advisory Council. One of the individuals that recommended Denise was David Denomie. David mentioned she's a wonderful individual and she is a tribal member as well, so she can bring in that insight. Her tribe is out of Minnesota, but she's very active in the Wisconsin tribes as well.

Motion by Mark Weisensel, seconded by Dave Lowe, to approve Denise Sweet's application and add her as an Advisory Council Member. Motion unanimously carried.

Advocacy Update

Janet Zander, Advocacy & Public Policy Coordinator (Please see written report for details)

- We're very busy planning Aging Advocacy Day on May 14th. In addition to that, we're planning to do some county or regional in-district meetings related to Aging Advocacy Day. One of the things that we've been hearing is that it's incredibly important for legislators to meet constituents in-district, those folks who can't get to Madison, or to do a follow up to those visits in Madison this year. We know we're not going to catch a lot of our legislators who will be back in district campaigning, so they may not be in Madison. We want to make sure that they're hearing directly

from the aging network professionals and the aging advocates, so we have been planning those. I met with our aging and Disability Professionals Association of Wisconsin this morning, to talk about what those regional meetings would look like. We'd like all of them to be held from mid-May to the end of June, so prior to the elections. We are also watching of course, for any map changes that might occur by March 15th and are discussing the impact of those.

- It's been an incredibly busy legislative session at the state. The assembly wants to wrap up yet this month, so we're seeing dozens of bills introduced each day. Some of those bills are being scheduled very quickly, like introduced on Tuesday, a hearing on Wednesday, in executive session on Thursday. So, when it's a priority, I can tell you they can move them pretty quickly. Other bills that we'd like to see move are moving a little less quickly.
- The written report I gave you gave you an update on where we're at with the healthy aging grants. These funds, which support the Wisconsin Falls Free Center and other evidence-based health promotion programs that are currently administered and coordinated by the Wisconsin Institute for Healthy Aging, which is a member of the Wisconsin Aging Advocacy network, along with GWAAR. So, we've been putting a lot of emphasis on that. Those bills have in fact been moving, and we're excited about that.
- I also gave you some information about a surrogate decision-making bill. The original bill was introduced by a representative whose sister was in the hospital and had not completed advance directives. So did not have any power of attorney for health care. She wasn't under guardianship and her illness, resulted in her being incapacitated to make health care decisions. She was very concerned that in this state, you're not automatically going to have your next of kin making those decisions. So she worked on a bill that would have appointed a surrogate decision maker to make decisions while that person was in the hospital, to make sure that their care and treatment was being guided by somebody who was looking out for their best interests. The bill took a lot of different turns and got a lot of amendments that didn't come from the original bill author, and we got very concerned when the bill was expanded to include discharging somebody from the hospital into a facility without that person's consent if they are still incapacitated. It's important to have someone that's the best person to make those decisions. In a guardianship process, you're going to have guardian ad litem. We need people to be appointed that, in fact, act and make decisions in the best interest of the patient. Long story short, we spent a lot of time advocating on this bill and wrote testimony the day before the hearing. The bill got pulled off the agenda, so we've spent all this

time working on this bill and a new bill was introduced and that bill was one of those bills that moved very quickly. I went down to Madison this week. We had a hearing on those bills in both the Assembly and the Senate this week, and the Assembly has already voted on that bill. So these bills are moving incredibly fast in committee, and they're very concerning because they give a what they're calling now, a patient representative, the authority to make decisions about the person's healthcare and finances related to their healthcare for an indefinite amount of time. Unless a guardian is later appointed, this person has the authority to be spending the persons money, making decisions and really that person has completely lost access to the guardianship process unless someone else petitions the court for guardianship. These are the bills we have to really pay close attention to and move quickly because they have such a detrimental effect to mostly older adults.

- I gave you some information on the specialized Transportation Assistance Pilot. This was a bill that was coordinating transportation with our non-emergency medical transportation and was looking to our Aging and Disability Resource Centers and our Mobility Managers in the state to help with that coordination. We are all on board with transportation coordination. Unfortunately, what many of our newer legislators don't understand, is that we had better coordination before the non-emergency medical transportation broker was put in place in this state. The capacity to do transportation coordination within our Aging and Disability Resource Centers, or even to coordinate a contract, is not there right now. They are underfunded to do the work that they need to do. Not all ADRC's are involved in transportation, and so we really had to sort of back them up just a little bit and say, you know, let's go forward with this Coordination Council. We think it would be great if state agencies who all do transportation, talk to one another and then thought about how their policies will impact people's ability to coordinate transportation. We don't want something going forward that would put something unfunded onto our aging and disability resource centers to create a system that would coordinate these rides. The other big concern is using the non-emergency medical transportation brokerage as the core of where this transportation would occur. This means this would only apply to people on Medicaid or Medicaid eligible and the rides would be based on what they pay their contracted transportation providers and their special medical vehicles. The average rate was about \$105.00 for a 12 mile trip and that would be paid for by the person themselves or one of our transportation programs. Well, that's a very expensive ride and most patients or most people are not going to be able to afford that. And most programs will end up serving far fewer people if they're spending \$105.00 per ride on average. So again, we want to help that bill, we don't always oppose them. We try to work with the authors to amend those bills to be something that we think is really going to work for older adults and the people who serve them.

- At the federal level, we are still working under a continuing resolution for the 2024 budget. That resolution expires March 8th, which means we're under a lot of pressure to get those appropriations bills signed so that we know for sure what funding will look like for the remainder of that federal fiscal year, which only runs through September 30th. So we are well into that year, not knowing the longer it continues and if we get past that March 8th date, and into dates in April, we are potentially looking at even bigger cuts facing our network. As I understand it, our contracts have been set at 2022 fiscal amounts in hopes that whatever happens we don't have to go back to folks and cut their funding even further, but it all depends on what happens in this federal budget. And so we are anxious to go to DC and help spread the word about what the need really is at the local level.
- The other thing that's happening at the federal level is the subsidy that many folks, including 400,000 households here in Wisconsin, have been receiving to help them pay to have access to the Internet. For many a subscription to the Internet is very expensive. During COVID, when people weren't getting out and about, they realized just how critical access is for a lot of public benefits. Having internet connectivity is expensive. The government subsidy was \$30.00 a month. It came from the federal government and with the end of the public health emergency comes the end of this program, which has been slowly unwinding. They stopped enrolling new people in and they expect to be out of money by April, which potentially means we have 400,000 households that are not going to be able to pay for their internet and may lose that access. And you know, as you're joining us virtually here, it is not a luxury item. Folks participate in a lot of business online and a lot of access to resources and benefits are online. We really are trying to figure out how we can we get some federal support for a bill that was introduced to extend that program at the federal level. Perhaps we can look at state subsidies.
- The governor has made this the year of the of the health care worker. In his speech he gave at the end of February, he has created a task force on the healthcare workforce to address the shortage of nurses and doctors and all sorts of health positions. He appointed 25 people to that task force. I am one of the 25 people on that task force pending approval of the Wisconsin Ethics Commission, related to my lobbying responsibilities. We will be meeting and providing some sort of proposals that have to be sent to the governor by September. So it will be a very fast timeline to address a very big and complex problem, which many of you are experiencing in the areas of the state you live in, where the shortage of providers and funding issues has led to a closure of a number of hospitals and clinics and making it more and more difficult for people to be able to access care.



Meal Prioritization Project

Nick Musson, OAA Consultant- Transportation Specialist

- You should have received a handout for this meal prioritization project. I wanted to bring it to your attention. My goal here is to just introduce you to the project and at our next meeting in July we will go into it more in depth. I'll have the consultants in charge of this project give you a presentation with more details. The Wisconsin Elder Nutrition program doesn't have the capacity to serve everybody 60 and older when it comes to home delivered meals. The challenge is going to continue as the number of older adults seeking services increases. The biggest fear is waitlists, that is, putting eligible recipients on a wait list to be able to get a home delivered meal. We all know how important it is to get nutritious meals delivered to seniors, so GWAAR has been working on a pilot project to put together a tool to prioritize individuals in case they have to go on a waitlist. The prioritization system provides a uniform framework to ensure persons with the highest nutrition needs are being served within the means of the program resources. This pilot project is going to be operating for a number of months. In July, when we meet, they will have the results of the pilot project. Pam Van Kampen, our Nutrition Consultant, will attend and she'll talk about the prioritization tool, and what the next steps are. But I do think it's important that you understand that this issue is going on and you can take a look at that handout that was sent out to you all.

GWAAR 2022-2024 Aging Plan Site Review

Nick Musson, OAA Consultant- Transportation Specialist

- On February 22nd the state will come to the Madison GWAAR office for our aging plan site review. Our current plan will be reviewed along with the goal progress thus far. All of the consultants are going to be participating, and they'll be doing a short presentation on each goal. This will allow the state to get an update, but also to ask questions. I will be reporting back on this site review at the next meeting. I feel that we are in a good position as we do a very good job of tracking goal progress over the years. We have a goal working document that you've all seen, which make this review process efficient. I'm excited to educate the state on all the hard work that we've been doing as far as the goals go, and I will report back to you at the next meeting some of the details of the site review and how it went.



GWAAR 2025-2027 Aging Plan Community Engagement

Nick Musson, OAA Consultant- Transportation Specialist

- Nick gave a PowerPoint presentation going over the official kick off of GWAAR's planning process for the new 2025-2027 Aging Plan and how the Advisory Council plays a very important role in this plan. A timeline was shared with the Advisory Council.
- A high-level overview was given of the roles of the Advisory Council has when it comes to the aging plan.
- The Aging Plan is a three-year document. It's developed by AAAs, so Area Agencies on aging, of which GWAAR is one. It's responsible for developing, planning, coordinating, and implementing services and programs for older adults in their specific assigned geographic areas. For GWAAR it's 70 counties and 11 tribes. The Advisory Council oversees and helps with the development of these 3-year plans by providing feedback, insight, recommendations to shape the goals, objectives and strategies outlining the plan.
- It's important to note that the Older American Act mandates that GWAAR develop and implement an aging plan as a condition for receiving federal funding. Having an aging plan ensures that AAAs comply with legal requirements and guidelines set forth by the Older American Act.
- There are three main components of the plan. Demographic analysis, community engagement (gathering input), and development of measurable written goals and strategies which will eventually be submitted to the state. It will serve as a blueprint for moving forward for the next three years and beyond.
- The next step is for Advisor Council Members is to start with the interviewing of aging unit directors. A script is provided to Advisory Council members to make thing easy. It can be in person or virtual.
- The next meeting will be in-person in July at the Portage County ADRC to discuss the community engagement data and to discuss what our goals and strategies should look like by using the input of our customers and outside organizations.



- We will present a final draft to the Advisory Console on November 15th and if approved, we will recommend that the draft 2025-2027 plan be presented to the GWAAR board for final approval. Once approved by the board it will be forwarded to the state.

July 19 In-person Meeting

Nick Musson, OAA Consultant- Transportation Specialist

- Nick would like to meet in person once a year and asked if the Advisory Council was agreeable to meeting July 19th to continue with the 3-year Aging Plan planning process. Everyone agreed, and the next Advisory Council meeting will be at the Portage County ADRC on July 19th.

Adjournment

Next Meeting Date: **July 19, 2024** (In-person at Stevens Point)

Future 2024 Meeting Dates:

May 14, 2024 (Aging Advocacy Day)

July 19, 2024

September 20, 2024

November 15, 2024

Recorder: Rosanna Mazzara, Operations Coordinator